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CENTRAL INTELLIGENCE AGENCY

REPORT

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1. The final authority in all questions regarding public health affairs in the DDR rests with the Central Committee (Zentralkomitee, ZK) of the SED. The Public Health Affairs Section of the ZK is headed by the SED-functionary, Weber (fnu). Prior to this ZK assignment, Weber was the Chief of the polyclinic of the SAG Autowelo (BMW Werke, an auto factory) in Eisenach and, later, Section Leader of the Industrial Health and Welfare Section of the Ministry of Health. He thus gained the confidence of the SED by striving to achieve the SED goals.
2. The Public Health Section of the Soviet Control Commission (SKK), in Karlshorst, is the second source of directives to the health administration. Apparently the Soviets still concern themselves with an endless number of minor details, continually publish reports, set up controls and fail to limit their supervision to basic fundamentals. Prior to the formation of the DDR, the Section Leaders and Chief Administrators of Health Affairs had direct relations with the equivalent Section in Karlshorst. However, since 1950, State Secretary ~~Werner~~ ^{Werner} has been their primary go-between. This serves to conceal at least some details from the DDR, particularly those problems of immediate interest to the Soviets such as hygiene, disease control and industrial health affairs. The former problems affect their troops, the latter their reparations and exports. The Soviets are extremely interested in the structure of administrative health affairs. In August 1952, intensive discussions were conducted by Lt. Col. Arkhangelski (fnu), Leader of the Health Affairs Section of the SKK, to determine whether 26 or only 22 statements of a proposal required his sanction. The proposal concerned the establishment of a new main section in the Ministry of Health. To obtain his approval the original proposal was altered.
3. For the last eight years the development of health affairs in the Soviet Zone has been determined by political necessity and Soviet models rather than by substantive needs. This course of action has led from a central administration of health affairs, built up according to a medical point of view, to the central "Commando" apparatus of the new Health Ministry. A comparison of the structure plans of the years 1946 and 1948 (see page 5) shows the curtailment of the substantive offices which were being replaced by a so-called main office, wherein political functions were represented.

25 YEAR RE-REVIEW

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4. At the present time the Ministry of Health exhibits the following structure:

a. Office of the Minister and Office of the State Secretary^{2/}

1) Central Sections and Reports

- a) Personnel
- b) Plans and Statistics
- c) Education
- d) Legal Affairs
- e) Budget
- f) Direction of Organization and General Administration
- g) Press Officer
- h) Financial Officer

2) Main Sections (Hauptabteilungen)

a) Therapy (Heilwesen)

Section H 1: Stationary and Ambulatory Treatment of the Sick
Section H 2: Industrial Health Care
Section H 3: Diseases of the General Population
Section H 4: Baths
Section H 5: Pharmacies and Medicinal Affairs

b) Science and Research (Wissenschaft und Forschung)

Section W 1: Medical Faculties and Scientific Institutes
Section W 2: Medical Literature and Popular Instruction
SECTION W 3: Management of Research

c) Mother and Child (Mutter und Kind)

Section M 1: Health Protection for Mother and Child
Section M 2: Welfare

d) Hygiene-Inspection (Hygiene-Inspektion)

Section Hygiene 1: Diseases
Section Hygiene 2: Local Hygiene
Section Hygiene 3: Food Hygiene

3) Main Administration (Hauptverwaltung)

- a) Pharmaceutical Industry
- b) Personnel
- c) Security Control

Planning
Inventories
Statistics
Material Supply

Production Direction
Main Mechanic (sic)

Bookkeeping
Finance Planning
Industrial Economy

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25X1

-3-

Work and Organizational Planning
Social Affairs
Loans
Manpower Planning
Training

Research and Development
Methods of Improvement

5. At the Bezirk level, health affairs are attached to the so-called Bezirk legislature through a Health Affairs and Welfare Commission and to the Bezirk Council through a Health Affairs Section (Abteilung Gesundheitwesen). The structure and command position of these Bezirk organizations follow the Bezirk Council structure finely elaborated by the Ministry of the Interior under which the Council operates. Within the Bezirk Council the Health Affairs Section shows the following administrative structure:

a. Budget

- 1) Preparation of the budget plan for operations
- 2) Guidance in organization and supervision of the budget of subordinate installations

b. Planning Office

- 1) Planning for health affairs
- 2) Responsibility for planning for all materiel for medical requirements

c. Stationary and Ambulatory Care of the Sick

- 1) Guidance of Kreise and directly subordinated installations and dispensary establishments
- 2) Direction of placement of physicians to insure medical care of the populace
- 3) Disposition of problems concerning payments
- 4) Approval or disapproval of applications for physicians and dentists to set up practice
- 5) Approval or disapproval of awards
- 6) Approval of physicians' specialties and medical auxiliary licenses

d. Industrial Health Affairs Office

- 1) Guidance and control of Kreise in performance of industrial health tasks
- 2) Investigation and approval of projects for industrial polyclinics, dispensaries and medical stations
- 3) Cooperation with work protection organizations on the Bezirk level

e. Office for Control of Diseases of the General Population

- 1) Introduction of measures for fighting tuberculosis
- 2) Medical control for all stationary installations designed to combat TB, including beds for TB stations and evaluation of TB statistics
- 3) Organization and control of installations combatting venereal diseases, diabetes, cancer and rheumatism
- 4) Evaluation of statistics

f. Office for Convalescent and Spa Affairs

- 1) Expert control and direction of doctors and polyclinics for convalescence
- 2) Direction and control of activities of all medical convalescence commissions

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25X1

-4-

- 3) Control and inspection of sanatoriums and convalescent homes

g. General Hygiene Office

- 1) Direction of the Kreise in control of infectious diseases
- 2) Control of production of serums
- 3) Direction and control of activities of the Zentralstelle fuer Hygiene (Central Hygiene Stations)
- 4) Establishment and control of central blood donor stations and preserved blood depots
- 5) Decisions in all questions on blood donor and blood group affairs
- 6) Investigation and evaluation of food poisoning problems

h. Pharmacy Affairs Office

- 1) Cooperation in establishment of new pharmacies and in relocation of those already established
- 2) Responsibility for procedures involving removal of accident hazards
- 3) Cooperation with the Magdeburg Pharmacopoeia Office
- 4) Direction of instruction in pharmacy
- 5) Distribution of raw materials and direction for their economic use
- 6) Control and distribution of pharmaceuticals, bandages and dental preparations
- 7) Control of the wholesale of drugs and narcotics according to laws
- 8) Seizure of poisonous material in the Bezirk

i. Mother and Child Office

- 1) Guidance of the Kreise in support, trusteeship, adoption and fostering of children
- 2) Placement of pregnant women in rest homes
- 3) Evaluation of reporting, particularly of infant mortality

6. There is a corresponding health affairs administrative structure at the Kreis level. The old question posed by the State Health Affairs Administration, as to whether the health office doctor should be the arbiter of community health affairs, has long since been decided. It would be impossible to name 237 trained physicians who could be entrusted with a position and a vote in the Kreis Council and in the City Council. Therefore, the community health affairs in the Kreise are now headed by SED-functionaries and the health office doctor in the locality has been stripped of any direct and immediate influence on health policies.

1. Comment. The proposed new section, at that time, was the "Apothekenwesen und medizinische Ausruestung." 25X1
2. Comment. The separation of duties of the Minister and State Secretary is normally arranged so that the State Secretary supervises personnel, organization and education and the Minister controls all other functions. In practice this separation of duties has no meaning. 25X1
3. Comment. A Bezirk is a governmental division roughly equivalent to a county. 25X1
4. Comment. A Kreis is a governmental division roughly equivalent to a township. 25X1
5. Comment. The Zentralstelle fuer Hygiene is now known as "Bezirks Hygieneinstitut." 25X1

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